

July 16, 2015

Pamela Booker
16227 Wildemere St.
Detroit, MI. 48221

Clerk of the Court
United States Bankruptcy Court
211 W. Fort St., Ste. 2100
Detroit, MI. 48226

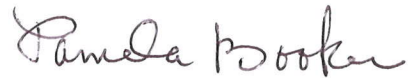
Re: Response Proposed Order Letter dated May 28, 2015; supplemental brief for claim
No 2177, Chapter 9; Case No 13-53846 and Amendment to claim request.

FILED
2015 JUL 16 P 3:19
U.S. BANKRUPTCY COURT
E.D. MICHIGAN - DETROIT

Hon. Thomas J. Tucker:

The City attorney has offered to settle my claim and I would like to amend the claim to include interior damages and loss of rents. I have included a proposal for interior repairs equaling seven thousand, seven hundred dollars (\$7,700.00). The last tenant I had paid three hundred a month (\$300.00) times 27 months (April 18, 2013 thru July 18, 2015) equaling eight thousand, one hundred dollars (\$8,100.00). Exterior repairs remain the same, five thousand four hundred fifty dollars (\$5,450.00) for a total of twenty one thousand, two hundred and fifty dollars (\$21,250.00). Thank you for your consideration.

Sincerely,



Pamela Booker
(313) 748-2877

Enc. 7

AMENDED

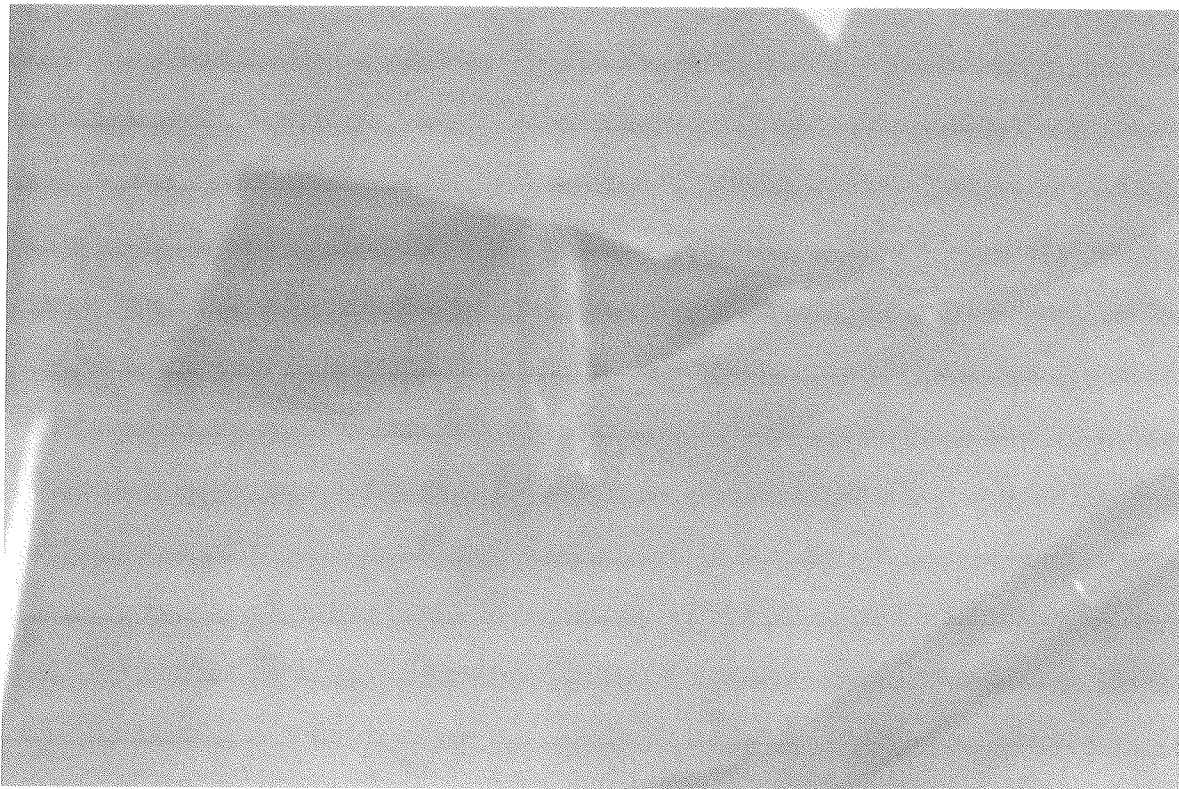
In its List of Claims, the City listed your claim as a contingent, unliquidated, and disputed unsecured claim in an unknown amount. To determine if you need to file a claim, please refer to the enclosed Information About Deadlines to File Claims.

B10 (Official Form 10) (04/13) (Modified)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT of MICHIGAN		CHAPTER 9 PROOF OF CLAIM
Name of Debtor: City of Detroit, Michigan	Case Number: 13-53846	FILED (I) COURT USE ONLY <input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Property Owner		
Name and address where notices should be sent: NameID: 11566221 Property Owner 16227 Wildemere Detroit, MI 48221		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number: _____ email: _____		
Name and address where payment should be sent (if different from above): Same		
Telephone number: 313-748-2877 email: _____		
1. Amount of Claim as of Date Case Filed: \$ <u>21,250.00</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Property Damage from Fallen Tree</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor: <u>4943</u>	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____
5. Amount of Claim Entitled to Priority as an Administrative Expense under 11 U.S.C. §§ 503(b)(9) and 507(a)(2).		\$ _____
5b. Amount of Claim Otherwise Entitled to Priority. Specify Applicable Section of 11 U.S.C. § _____.		\$ _____
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		
7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		
8. Signature: (See instruction # 8) Check the appropriate box. <input type="checkbox"/> I am the creditor. <input type="checkbox"/> I am the creditor's authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. <input type="checkbox"/> I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.) (See Bankruptcy Rule 3004.) I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief. Print Name: <u>Pamela Booker</u> Title: <u>Owner</u> Company: _____ Address and telephone number (if different from notice address above): <u>16227 Wildemere</u> <u>Det., MI. 48221</u> Telephone number: <u>313-748-2877</u> email: _____ (Signature) <u>Pamela Booker</u> (Date) <u>7/16/15</u>		

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.









Mend It Now Custom Construction LLC

"Let Our Team Build Your Dream"

P.O. Box 661 Garden City, MI 48136



PROPOSAL AND CONTRACT

Date 07-13-15

Prepared For:

Pamela Booker
15741 Lamphere St.
Detroit, MI. 48223

Phone No.: 313-748-2877

Email: pamelabooker1@gmail.com

Mend It Now Custom Construction will Perform all Labor / Furnish all Materials necessary to complete the following:

Repair of fallen tree damage to interior of home

Living Rm.:

Ceiling drywall & flooring water damage due to being exposed to outside storm conditions from tree falling on home

Removal of damaged ceiling & flooring will be removed & replaced w/new

Underneath crawl space where living room & corner hallway meet flooring joist have rotten due to roof leakage which cause for need of home to be jacked up and damaged joist to be removed & replaced w/new & install (1) new steel floor jack

Kitchen:

Ceiling drywall & flooring water damage due to being exposed to outside storm conditions from tree falling on home

Removal of damaged ceiling & flooring will be removed & replaced w/new

Bath Rm.:

Ceiling drywall & west wall water damage due to being exposed to outside storm conditions from tree falling on home

Removal of damaged ceiling drywall & west wall will be removed & replaced

All of the above work will be completed in a substantial and workmanlike manner according to standard industry practices for the sum of:
Seven Thousand Seven Hundred Dollars \$7,700.00/100 (Dollars)

Project progress payments to be made as follows: Before work begins **\$3,850.00** will be due & final balance of **\$3,850.00** will be due upon completion.
If additional payments are needed before completion of project homeowner/client will be notified.

Please make payment payable to Mend It Now Custom Construction or Jayson Walker

Any alteration or deviations from the above specifications involving extra cost of materials or labor will only be executed upon written orders for same, and will become an extra charge over the sum mentioned in this contract. All agreements must be made in writing.

PROPOSAL ACCEPTANCE

You are hereby authorized to proceed with this project according to the specified agreement above, for which I agree to pay the amount mentioned in said proposal according to the terms thereof.

Customer Signature Print Name Date

MINCC Authorized Rep Signature Date

"Thank You for Allowing Us to Serve You"

MINCC National Home Office: 2770 Rossmere Street Colorado Springs, CO 80919